AMENDMENTS TO THE CLAIMS:

This listing of claims will replace all prior versions and listings of claims in the application:

LISTING OF CLAIMS:

Claims 1-7 (Previously canceled).

Claim 8 (Previously amended): A device for intravascular cardiac valve surgery, comprising:

a micro axial pump(40) fastened to a catheter (10) and having a tubular pump portion (14); and

a dilating device (18) surrounding the pump portion (14) wherein said dilating device is configured for breaking up a stenosis of a [catheter] cardiac valve upon deployment while positioned within said cardiac valve (AK).

Claim 9 (Previously added): The device of claim 8, characterized in that the pump portion (14) comprises a pump ring (15) and a tubular cannula (16) connected therewith.

Claim 10 (Previously added): The device of claim 8, characterized in that the dilating device (18) comprises an annular high-pressure balloon inflatable to at least 1.0 bar.

Claim 11 (Previously added): The device of claim 10, characterized in that the pump portion (14) comprises a pump ring (15) and a tubular cannula (16) connected therewith.

Claim 12 (Previously added): The device of claim 11, wherein the high-pressure balloon is seated on a rigid annular support.

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Claims 13-17 (Previously canceled).

Claim 18 (Previously added): The device of claim 10, wherein said balloon has a rectangular longitudinal cross-section.

Claim 19 (Previously added): The device of claim 8, wherein said micro axial pump comprises an implantable tubular drive portion that is directly coupled to said pump portion.

REMARKS

Applicants respectfully request consideration of the following remarks and reconsideration of the above-referenced patent application. Claims 8-12, 18 and 19 remain pending.

Claims 8, 9 and 19 were rejected under 35 U.S.C. 102(e) as anticipated by Voelker (U.S.P.N. 6,248,091). Applicants respectfully traverse. It is respectfully submitted that contrary to the Examiner's assertion, the cited reference makes absolutely no suggestion that the balloon is to be configured for breaking up a stenosis of a cardiac valve. The description at col. 1 line 5, col. 2, lines 7, 8 and 34, as well as col. 4, line 4, exclusively teaches the dilation of a vessel. The cited reference is silent as to the configuration of the balloon, let alone devoid of any suggestion of a balloon specifically configured for breaking up a stenosis in a heart valve. Moreover, it is to be noted that the device of the cited reference relies on a cable drive (23) for coupling the pump portion with an external drive portion in stark contrast to the **implantable** drive portion specifically claimed in rejected Claim 19. It is respectfully submitted that anticipation is therefore precluded.

Furthermore, in view of the fact that the cited reference is not concerned with the problems associated with the dilation in a stenosed heart valve while continuing to pump blood therethrough, it is respectfully that a solution to such a problem cannot be considered obvious thereover. A balloon configured for breaking up a stenosis in a heart valve as per the claim limitation is critical to the present invention and is not in any way

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